00-51) posteroT9 SECO-1600 END. 2005/167 House Second her val beveren

Under the Paperwork P	eduction Act of 1995, no per	cons are required to resp	and to a pollection of t	domination unites	I deptoys	ARTONE	country transfer
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-876					Application of Protest Hamping		
APPLICATION AS FILED - PART I (Column 1) (Column 2)			SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	KUKBER FILED	NUMBER EXTRA	RATE(T)	FEE (B)		ATE (A)	FEE (I)
EASIO FEE		·			:		
FOR LIGHT AND CONTROL	1					:	
EXAMINATION FEE OT OFF LIKE, 65, 67 (6)					1		
TOTAL CLAMB p7 OFR 1.16(0)	enlinus 20 =	.**	1.25.		OR X	30 -	
NOEPENDENT CLAUS	= 8 curdina	• • •	×100	· · · · · ·	***	OO	
	if the specification and specis of gaper, the sp	drawings exceed 100.	1 100		امرا	رحب	
APPLICATION SIZE	le \$260 (\$125 for small	entity) for each			· . L		
(P) OFR 1.16(N)	to \$250 (\$125 for small additional Sentine (\$14) 35 U.S.C. 41(8)(1)(9) s	und 57 OFR 1.16(c).	THE PERSON NAMED IN	directors to Ton	ALT PROVIDE	MOTOR OF	Program.
MULTIPLE-DEPENDENT CLAIM PRESENT (67 CFR 1.16(8)		1-1180		13	0		
* If the difference in column 1 is less than zero, enter "O" in column 2.			TOTAL		to to	TAL	
APPLICATION AS AMENDED - PART II							
1/10/11							
	Alus I HK	okumin 2) (Column 8) SHEBY	8MALL EI	mr .	4	BMALL EN	mir
	AAIMING NU FTER PREV NOMENT PAI	MBER PRESENT	RATE (f)	ADDI- TIONAL	RAT	E(f)	ADDI- TIONAL
Total AME Total or over (Men) Application Size Fee (S	Mirks PA	D.FOR	×35.	FEE III		o.k	FEB.
E Independent	2 Minus ···	3		(1	兴小	
Application Size Fee (S	A.C.	/\ <u>`</u>	العرب	-	-/-		
FRET PRESENTATION OF MATTPLE DEPENDENT CLAIM (NT GIR 1.160) :			180	O C	37	0	
TOTAL TOTAL OR ADDITION							
(Octumn 1) (Octumn 2) (Octumn 3)							
11: a	UKS HIGH	EST	RÁTE (Å)	ADDI-	1.017	- T.	ADDi -
TIN TIN VIII AM	TER PREVI	OUSLY EXTRA		NONAL REE AS	RATE	1 7	TIONAL BE (1)
Total From Lings Grown Lings G	Allegas . **	25 - 0	x35.	i cr	,KC	3.	
Independent Con	7. Muns	3 - 0	100	OR	lan	5	
Application Stra Fee (97 OFR (.16(d))							
ERRET PRESENTATION OF MULTIPLE DEPENDENT CLAIM OT OFFI LIFED							<u>/</u> ;
···	•.		TOTAL ADDITEE	/ or	TOTAL ADD'L FE	. .	
4. If the solery in column 4 is tace then the array in column 2 with 975 by allowing							
"I the "Highest Number Previously Paid For" by 1149 SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" by 1149 SPACE is less than 2, enter "20". "If the "Highest Number Previously Paid For" by 1149 SPACE is less than 2, enter "20".							
The Tilghest Humber Previously Paid For (Total or tridependent) is the Highest number found in the appropriate box in column 1.							

This collection of information is required by 37 GFR 1.16. This information is required to obtain or retain a benefit by the public which is to file (and by the USTO to process) an application Confidentiality is governed by 35 U.S.C. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing; and submitting the completed application form to the USPTO. This Wiffrary depending upon the individual case, Any comments on the amount of time you require to complete this form aritifor algoristics for reducing this burden, should be sent to the Chief Information Officer, U.S. Palent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.